MAR 2 3 2007

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D
NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OM	BA	PPRO	VAL

OMB Number:3235-0076

16.0

Expires:April 30, 2008

Estimated average burden

Pre 07048893

<i>l</i> ; <i>l</i>					<u> </u>	
Name of Offering	/(☐ check if this is an	amendment and name	has changed, and in	dicate change.)	/2	85704
Issuance of Partners	ship Interests				10	00101
Filing Under (Check b	ox(es) that apply):	☐ Rule 504	☐ Rule 505	Rule 506	☐ Section 4(6)	DULOE
Type of Filing:	☑ New Filing	☐ Amendment				
		A. BASI	CIDENTIFICAT	ION DATA		
1. Enter the informa	ation requested about the	ne_issuer				
Name of Issuer	(check if this is an	amendment and name	has changed, and ir	idicate change.)		
Asia Alternatives Ca	pital Partners, LP				1	
Address of Executive	Offices		(Number and Stree	et, City, State, Zip Coo	ie) Telephone Nu	mber (Including Area Code)
One Embarcadero_C	enter, Suite 500, San I	Francisco, CA 94111				(415) 513- <u>5817</u>
Address of Principal C	Offices		(Number and Street	OCESSEU	e) Telephone Nu	mber (Including Area Code)
(if different from Exec	utive Offices)		'1 U			
Brief Description of Br	usiness: Private e	quity investing		MAR 2 9 2007 £		
Type of Business Org	anization			THOMSON		
Ω	corporation	🛭 limited 🛊	oartnership, already	remedNCiAL	other (please sp	ecify):
	business trust	☐ limited p	partnership, to be for	med		
		_	Month	Year_		_
	ate of Incorporation or	<u> </u>	0 4	20	06 ⊠ Act	ual 🔲 Estimated
Jurisdiction of Incorpo	oration or Organization:			eviation for State; r other foreign jurisdic	etion) D	E
• •						

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number

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1		A. BASIC II	DENTIFICATION DAT	A	
Each beneficial ownEach executive office	ne issuer, if the iss ner having the pow cer and director of	uer has been organized wit ver to vote or dispose, or dir		of, 10% or more of ging partners of par	a class of equity securities of the issuer; rtnership issuers; and
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ Manager/Managing Director
Full Name (Last name first, i	if individual):	Asia Alternatives Pri	vate Equity Partners, LLC	(its General Partr	ner)
Business or Residence Add	ress (Number and	Street, City, State, Zip Cod	le): c/o One Embarcad	dero Center Suite	500, San Francisco, CA 94111
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ Manager/Managing Director
Full Name (Last name first, i	if individual):				
Business or Residence Add	ress (Number and	Street, City, State, Zip Cod	le):		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐Executive Officer	☐ Director	☐ Manager/Managing Director
Full Name (Last name first, i	f individual):			_	
Business or Residence Add	ress (Number and	Street, City, State, Zip Cod	e):		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual):				
Business or Residence Addi	ress (Number and	Street, City, State, Zip Cod	le):		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual):				
Business or Residence Add	ress (Number and	Street, City, State, Zip Cod	e):		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual):				
Business or Residence Addi	ess (Number and	Street, City, State, Zip Cod	e):		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual):				
Business or Residence Addi	ress (Number and	Street, City, State, Zip Cod	e):		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual):				
Business or Residence Addr	ess (Number and	Street, City, State, Zip Cod	e):		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual):				
Business or Residence Addr	ess (Number and	Street, City, State, Zip Cod	e):		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Heat the Issuer sold, or does the issuer intend to sell, to non-nonredicted trivestors in this offering?															
Has the issuer sold, or does the issuer intered to sell, to non-accredited investors in this offering?						В.	INFORM	ATION	ABOUT	OFFER	RING				
Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?													Ye	<u>s</u>	<u>No</u>
2								edited inve	estors in th	is offering	?			1	⊠
No	An	swer also i	n Appendi	x, Column	2, if filing	under ULC	DE.								
Does the offering permit joint ownership of a single unit?	2. W	nat is the m	ninimum in	vestment t	hat will be	accepted	from any i	ndividual?					<u>\$ 10</u>	000,000	
4. Either the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for scillation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated persons of such a broker or dealer, you may set forth the information for that broker or dealer cells response to the state of states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer. If more than five (5) persons to be listed are associated broker or Dealer C. P. Eaton Partners, LLC States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check All States) or Check individual States). [All Jak													Ye	<u>s</u>	No
any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person of subt a person of subte. Jist the name of the broker or dealer. If more than five (5) persons to be listed are associated person of subt a broker or dealer, you may set from the Information for that throker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) 143 Rowayton Avenue, Rowayton, CT 06853 Name of Associated Broker or Dealer C. P. Eaton Partners, LLC States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check 'All States' or check Individual States) [ALL Clark C	3. Do	es the offe	ring permi	t joint own	ership of a	single uni	t?						⋈		
offering. If a person to be listed is an associated person of agent of a broker of dealer registered with the SEC and/or with a state or states, list the name of the broker of dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) 143 Rowayton Avenue, Rowayton, CT 08853 Name of Associated Broker or Dealer C. P. Eaton Partners, LLC States in Which Person Listed Has Solicited of intends to Solicit Purchasers (Check Tall States) [All States] [All States															
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check 'All States or Residence Address (Number and Street, City, State, Zip Code) 143 Rowayton Avenue, Rowayton, CT 06863	off	ering. If a p	person to I	be listed is	an associ	ated perso	on or agen	t of a brok	er or deale	r registere	d with the	SEC			
Business or Residence Address (Number and Street, City, State, Zip Code) 143 Rowayton Avenue, Rowayton, CT 06853	an as:	d/or with a sociated pe	state or st ersons of s	ates, list th uch a brok	e name of er or deal	f the broke er, you ma	r or dealer y set forth	r. If more to the inform	than five (5 nation for t	5) persons hat broker	to be liste or dealer	d are only.			
Name of Associated Broker or Dealer C. P. Eaton Partners, LLC								-							
Name of Associated Broker or Dealer C. P. Eaton Partners, LLC														_	
All States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check 'All States' or check individual States)	Busines	s or Reside	ence Addr	ess (Numb	er and Sti	eet, City, S	State, Zip	Code)	143 Row	ayton Av	enue, Ro	wayton, C	Г 06853		
Check 'All States' or check individual states	Name o	f Associate	ed Broker o	or Dealer	C.	P. Eaton 1	Partners,	LLC							
Check 'All States' or check individual states								.							
Mile														ı	☐ All States
MT NE NNE	☐ [AL]	□ [AK]	□ [AZ]	□ [AR]	⊠ [CA]	□ [co]	□ [CT]	□ [DE]	⊠ [DC]	☐ [FL]	☐ [GA]	[HI]			
Control Cont	⊠ (IL)	🖾 [IN]	□ [IA]	□ [KS]			☐ [ME]		⊠ [MA]		□ [MN]	□ [MS]			
Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	□ [МТ]	□ [NE]	□ [и∨]	🗀 [ин]	□ [ил]		□ [ИУ]			□ [ОН]		□ [OR]	□ [PA]		
Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	□ (RI)	□ [sc]	□ (SD)	[מדן 🗆		[עדן]	□ [VT]	□ [VA]	□ [WA]	□ [WV]			□ [PR]		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Full Nar	ne (Last na	me first, if	individual)										
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Rucinos	e or Posida	ence Addr	ace (Numb	or and Str	ant City 9	State 7in (Code)						-	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check 'All States' or check individual States)	ousines	s of Iveside	elice Audi	ess (Munic	e alla Si	eet, Oity, v	otate, zip								
Check "All States" or check individual States)	Name o	f Associate	ed Broker o	or Dealer											
[AL]	States i	n Which Pe	erson Liste	d Has Soli	cited or In	tends to S	olicit Purch	nasers							
[IL]	(CI	neck "All St	tates" or cl	neck indivi	dual State	s)				•••••				[☐ All States
MT	☐ [AL]														•
RI	_														
Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)			• •		• •						- •				
Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)							[VT]	∐ [VA]	∐ [WA]				□ [PR]		
Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Full Nar	ne (Last na	ame first, if	individual)										
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	Busines	s or Reside	ence Addre	ess (Numb	er and Str	eet, City, S	State, Zip (Code)							
(Check "All States" or check individual States)	Name o	f Associate	d Broker o	r Dealer											
□ [AL] □ [AK] □ [AZ] □ [AR] □ [CA] □ [CO] □ [CT] □ [DE] □ [DC] □ [FL] □ [GA] □ [HI] □ [ID] □ [IL] □ [IN] □ [IA] □ [IA] □ [ME] □ [MD] □ [MI] □ [MN] □ [MS] □ [MO] □ [MT] □ [NV] □ [NH] □ [NY] □ [NY] □ [ND] □ [OH] □ [OK] □ [PA]														r	☐ All States
□ [IL] □ [IN] □ [IA] □ [IA] □ [ME] □ [MD] □ [MI] □ [MN] □ [MS] □ [MO] □ [MT] □ [NE] □ [NV] □ [NN] □ [NY] □ [NC] □ [ND] □ [OH] □ [OR] □ [PA]	_ `	_				•							וסוז 🗀		
\square [MT] \square [NE] \square [NV] \square [NH] \square [NJ] \square [NM] \square [NY] \square [NC] \square [ND] \square [OH] \square [OK] \square [OR] \square [PA]			_								_		_ ` `		
	_											_ ` `	_ ` `		
		□ [sc]			-										

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

	box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		gregate	Am	ount Aiready
	Type of Security		ring Price		Sold
	Debt	<u>\$</u> _	. 0	<u> </u>	0
	Equity	\$	0	\$	0
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$	0	<u>\$</u>	0
	Partnership Interests	\$ 215,	750,000.00	\$	215,750,000.00
	Other (Specify)	\$	0	<u> </u>	0
	Total	\$ 215,	750,000.00	\$ 2	15,750,000.00 ¹
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			umber vestors	Do	Aggregate bliar Amount f Purchases
	Accredited Investors		20	<u> </u>	215,750,000.00
	Non-accredited Investors		0	<u>\$</u>	0
	Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE.		n/a	<u>\$</u>	n/a
3.	•		n/a /pes of		n/a
3.	Answer also in Appendix, Column 4, if filling under ULOE. If this filling is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the	Ty			
3.	Answer also in Appendix, Column 4, if filling under ULOE. If this filling is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.	Ty Se	/pes of ecurity		ollar Amount
3.	Answer also in Appendix, Column 4, if filling under ULOE. If this filling is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of Offering	Ty Se	/pes of ecurity n/a		ollar Amount Sold
3.	Answer also in Appendix, Column 4, if filling under ULOE. If this filling is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C—Question 1. Type of Offering Rule 505	Ty Se	/pes of ecurity n/a		ollar Amount Sold n/a
3.	Answer also in Appendix, Column 4, if filling under ULOE. If this filling is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of Offering Rule 505	Ty Se	/pes of ecurity n/a n/a		ollar Amount Sold n/a n/a
3 .	Answer also in Appendix, Column 4, if filling under ULOE. If this filling is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C—Question 1. Type of Offering Rule 505	Ty Se	/pes of ecurity n/a n/a n/a		oliar Amount Soid <u>n/a</u> n/a n/a
	Answer also in Appendix, Column 4, if filling under ULOE. If this filling is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of Offering Rule 505	Ty Se	/pes of ecurity n/a n/a n/a		oliar Amount Soid <u>n/a</u> n/a n/a
	Answer also in Appendix, Column 4, if filling under ULOE. If this filling is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C—Question 1. Type of Offering Rule 505	E	/pes of ecurity n/a n/a n/a		ollar Amount Soid n/a n/a n/a
	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C—Question 1. Type of Offering Rule 505		/pes of ecurity n/a n/a n/a		ollar Amount Sold n/a n/a n/a
	Answer also in Appendix, Column 4, if filling under ULOE. If this filling is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of Offering Rule 505	Ty Si	/pes of ecurity n/a n/a n/a n/a n/a		ollar Amount Soid n/a n/a n/a 0
	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C—Question 1. Type of Offering Rule 505	Ty Se	/pes of ecurity n/a n/a n/a n/a n/a		ollar Amount Sold n/a n/a n/a n/a 0 0 50,000.00
	Answer also in Appendix, Column 4, if filling under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C—Question 1. Type of Offering Rule 505		/pes of ecurity n/a n/a n/a n/a n/a		ollar Amount Soid n/a n/a n/a n/a 0 50,000.00
	Answer also in Appendix, Column 4, if filling under ULOE. If this filling is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C—Question 1. Type of Offering Rule 505	Ty Si	/pes of ecurity n/a n/a n/a n/a on/a 1		ollar Amount Sold n/a n/a n/a n/a 50,000.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

This includes the investment of three (3) non-US based investors, the aggregate amount of which is \$95,000,000. 700652898v1

	C. OFFERING PRICE, NUM	BER OF INVESTORS, EX	KPENSES	AND US	E OF PRO	DCEED	S 	
. (Enter the difference between the aggregate offering the second of the sec	o Part C-Question 4.a. This diff	ference is the	e		<u>\$</u>		215,700,000.00
. (ndicate below the amount of the adjusted gross proce used for each of the purposes shown. If the amount for estimate and check the box to the left of the estimate. the adjusted gross proceeds to the issuer set forth in re	r any purpose is not known, fun The total of the payments listed	nish an I must equal	Pa	yments to			
				D	Ófficers, irectors & Affiliates			Payments to Others
	Salaries and fees			· <u>\$</u>	0	_ 🗆	\$	0
	Purchase of real estate			\$	0_	_ 🗆	\$	0
	Purchase, rental or leasing and installation of m	achinery and equipment		\$	0	_ 🗅	\$_	0
	Construction or leasing of plant buildings and fa	cilities		\$	0	_ 🗆	\$	0
	Acquisition of other businesses (including the voffering that may be used in exchange for the a							
	pursuant to a merger)			\$	0_	_ 🗆	\$	_0
	Repayment of indebtedness			\$	00	_ 🗀	\$	0
	Working capital			\$	00	_ 🛛	<u>\$</u>	215,700,000.00
	Other (specify):			\$	0_	_ 🛭	\$	0
				\$	0_	_ 🗅	\$	0
	Column Totals			\$	0	_ 🖾	\$:	215,700,000.00
	Total Payments Listed (column totals added)				⊠ <u>\$</u>	215,7	700,00	0.00
	····	D. FEDERAL SIGNAT	URE					
cons	issuer has duly caused this notice to be signed by the titutes an undertaking by the issuer to furnish to the U. e issuer to any non-accredited investor pursuant to pa	S. Securities and Exchange Co						
Issue	er (Print or Type)	Signature			C	ate		
Asia Rv: /	Alternatives Capital Partners, LP Asia Alternatives Private Equity Partners, LLC, its General Partner	174			٨	Aarch 16,	2007	
i	to delicial rattlici							
· i	e of Signer (Print or Type)	Title of Signer (Print or Type)					

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE							
1.	Is any party described in 17 CFR 230.262 presently su	ubject to any of the disqualification provisions of such rule?	Yes	No ⊠					
	s	ee Appendix, Column 5, for state response.							
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.								
3.	The undersigned issuer hereby undertakes to furnish t	o the state administrators, upon written request, information furnis	hed by the issuer to	offerees.					
4.		amiliar with the conditions that must be satisfied to be entitled to the idea and understands that the issuer claiming the availability of this							
	issuer has read this notification and knows the contents orized person.	s to be true and has duly caused this notice to be signed on its beh	alf by the undersign	ned duly					
Issu	er (Print or Type)	Signature	Date						
	n Alternatives Capital Partners, LP Asia Alternatives Private Equity Partners, LLC, its General Partner	NL	March 16, 2007						
Nan	ne of Signer (Print or Type)	Title of Signer (Print or Type)	l	-					

Chief Financial Officer



Instruction:

William D. LaFayette

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.